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Epilepsy: Information on seizures

Anyone can have a single **seizure** at some point in their life. This can happen if the circumstances are appropriate. This is not the same thing as having epilepsy, which means having a **tendency to experience recurrent seizures** that originate in the brain. The following information relates to people with epilepsy.

What is a seizure?

An epileptic **seizure** (often called a fit and sometimes an attack, turn or blackout) happens when **ordinary brain activity is suddenly disrupted**. The seizures described here are epileptic and arise from the brain.

Epileptic seizures can take many forms, since the brain is responsible for such a wide range of functions, including:

- personality
- mood
- memory
- sensations
- movement
- consciousness

Any of these functions may be temporarily disturbed during the course of a **seizure**.

Some very young children have convulsions when there is a sudden rise in their body temperature and this is called a 'febrile convulsion'. This is not classified as epilepsy.

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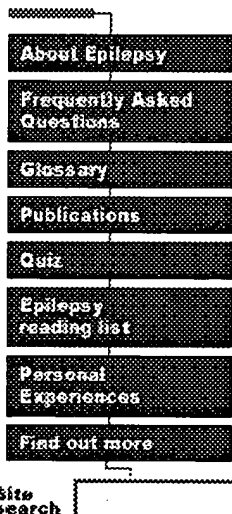
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How can seizures be described?

There are **many different types of seizures**. Not all of them involve convulsions. When naming seizures, it is important to use terms which describe what is happening during the **seizure** and to avoid terms such as 'mild' or 'major' which do not describe the event.

A person with epilepsy can experience more than one type of **seizure**. The frequency, length and pattern of seizures tends to be fairly constant for each person, although it may change in the longer term. If a person becomes aware of any changes to their seizures it may be helpful to have a review of their epilepsy and its treatment.

Partial seizures

During partial seizures the disturbance in brain activity begins in or involves **one part** of the brain. These seizures are sometimes known as 'focal' seizures. A person's experiences during the **seizure** will depend on which part of the brain is being affected.

- In **simple partial seizures** consciousness is not impaired. The **seizure** may be confined to either rhythmical twitching of one limb or part of a limb, or to unusual tastes or sensations such as pins and needles in a specific part of the body. Simple partial seizures sometimes develop into other sorts of seizures and so they may be referred to as a '**warning**' or '**aura**'.
- **Complex partial seizures** differ from simple partial seizures in that consciousness is affected and so the person may have limited or no memory of the **seizure**. The seizures may be characterised by a **change in awareness as well as automatic movements** such as fiddling with clothes or objects, mumbling or making chewing movements, or wandering about and general confusion. The person may respond if spoken to. Complex partial seizures most often involve the temporal lobes of the brain, in which case the person may be said to have 'temporal lobe epilepsy', however they can also affect the frontal, parietal and occipital lobes.
- For some people either of these partial seizures may spread to involve the whole of the brain. This is called a **secondarily generalised seizure** and the person will lose consciousness. If this spread is rapid, the person may not be aware of the partial **seizure** onset.

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Generalised seizures

In these seizures the whole of the brain is involved and consciousness is lost. They often occur with no warning and the person will have no memory of the event. The **seizure** may take one of the following forms:

- The most recognised type of **seizure** is the generalised **tonic-clonic convulsive seizure**, sometimes called a 'grand mal' **seizure**. In the first part of the **seizure** the person becomes rigid and may fall. The muscles then relax and tighten rhythmically causing the person to convulse. At the start of the **seizure** the person may bite their tongue or cry out. Breathing may become laboured and they may be incontinent. After the **seizure** the person may feel tired, confused, have a headache and may need to rest to recover fully.
- In **tonic seizures** there is general stiffening of the muscles without rhythmical jerking. The person may fall to the ground with consequent risk of injury but generally recovery is quick.
- **Atonic seizures**, also known as drop attacks. These involve a sudden loss of muscle tone, causing the person to fall. Again, there is consequent risk of injury but recovery is generally rapid.
- **Myoclonic seizures** involve brief and abrupt jerking of one or more limbs. These often happen within a short time of waking up, either on their own or with other forms of generalised **seizure**.
- **Absence seizures** occur most commonly in children and are sometimes referred to as 'petit mal'. The person experiences a brief interruption of consciousness and becomes unresponsive. They may appear '**blank**' or '**staring**' usually without any other features, except perhaps for a fluttering of the eyelids. Absence seizures often last for only a couple of seconds and as they are subtle they may go unnoticed.

Some **seizure** patterns may not fit into any of the above categories or may include elements of different seizures. These are called unclassifiable seizures.

Some people experience seizures only during sleep. As these will usually be at night they are called **nocturnal seizures**. These seizures could also occur during the day if the person were to fall asleep. This does not describe the form that the seizures take, only the time when they occur.

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Status epilepticus

Most seizures last for the same amount of time for each person and usually stop of their own accord.

However, in some circumstances seizures are not self-limiting and do not stop, or one **seizure** occurs after another with no recovery period in between. This situation is known as status epilepticus. This can occur in any type of **seizure**, however it is a **medical emergency** requiring medical intervention if it occurs with a tonic-clonic **seizure**.

An ambulance should be called if the seizure lasts for 2-3 minutes longer than normal, or if it lasts for more than 5 minutes and the usual duration of a **seizure** is not known.

Triggers

For some people seizures are triggered by certain stimuli, which may differ from one individual to another. Identifying these triggers can help to avoid situations where seizures might occur. Such triggers may include lack of sleep, stress, alcohol or flickering lights. If seizures are triggered by flickering lights this is called photosensitive epilepsy.

More information about [photosensitivity](#)

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What to do when a seizure happens

Convulsive seizures

Seizures cannot be stopped or altered, so the best thing to do is to follow these guidelines.

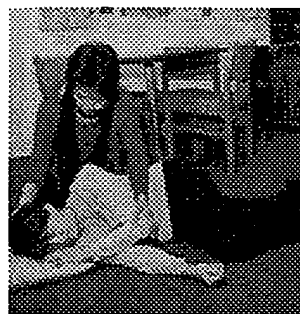
During the seizure:

- Try to stay calm
- Check the time to monitor how long the **seizure** lasts, as prolonged seizures may require emergency medical help
- Prevent others from crowding round
- Put something soft under the person's head - such as a jacket or cushion - to prevent injury
- Only move the person if they are in a dangerous place, for example at the top of a flight of stairs or in the road. **Move things away** from them if there is a risk of injury.
- Do not attempt to restrict or restrain the convulsive movements as this may cause injury to the person or yourself
- **Do not put anything in the person's mouth.** There is no danger of them swallowing their tongue during a **seizure** and you may damage their teeth
- Check that any tight clothing around the neck is loosened, including necklaces.

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Once the convulsions have stopped:

- Roll the person onto their side into the **recovery position**
- Wipe away any excess saliva and if breathing is still laboured, check that nothing is blocking the throat such as dentures or food
- Do all you can to minimise any embarrassment. If the person has been incontinent deal with this as sensitively as possible
- Stay with the person giving reassurance until they have fully recovered
- Do not give the person anything to eat or drink until they are fully recovered.



Convulsive seizures can be frightening to watch, but the person having the **seizure** is not in **pain** and will have little or no memory of what has happened.

At the start of the **seizure** the person may cry out as the air from the lungs is expelled through the voice box. During the early part of a **seizure** breathing may stop and the person may go slightly blue. This looks alarming but is to be expected until normal breathing resumes later on. The person may also bite their tongue.

Medical help should be called if:

- Someone has injured themselves badly in a seizure
- They have trouble breathing after a seizure
- One seizure immediately follows another without recovery in between
- The seizure continues for longer than usual (they may be carrying a card which says how long their seizures usually last) or the seizure lasts more than five minutes and you do not know how long they usually last

The video 'Epileptic Seizures' contains footage of seizures and information about first aid. It is ideal for training purposes. Order it in the [online shop](#).

Training is available from the NSE on epilepsy awareness, including management of seizures. Information on [NSE training services](#)

UK Epilepsy Helpline: 01494 601400
Monday - Friday 10am - 4pm

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The NSE is the largest medical charity in the field in the UK. We are committed to providing information and support to professionals and people affected by epilepsy, and to raising awareness of epilepsy among the public. We provide care for people with epilepsy through medical, psychological and rehabilitation services.

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mannitol

Dictionary

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man-ni·tol (män'î-tôl', -tôl', -tôl') 

n.

A white, crystalline, water-soluble, slightly sweet alcohol, $C_6H_8(OH)_6$, used as a dietary supplement and dietetic sweetener and in medical tests of renal function.

[MANNITE] + -OL¹.]

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man-ni·tol (män'î-tôl', -tôl')

n.

A white, crystalline, water-soluble, slightly sweet alcohol, used as a dietary supplement and dietetic sweetener and in medical tests of renal function.

Food Glossary

 Hungry Monster.com

Mannitol

A white, crystalline sweetener added to processed foods for the purpose of thickening, stabilizing and sweetening.

WordNet



Note: click on a word meaning below to see its connections and related words.

The *noun* **mannitol** has one meaning:

Meaning #1: a diuretic (trade name Osmitol) used to promote the excretion of urine

Synonym: Osmitol

Wikipedia



mannitol

Mannitol or **1,2,3,4,5,6-hexanehexol** ($C_6H_8(OH)_6$) is a vasodilator which is used mainly to reduce pressure in the cranium, and to treat patients with oliguric renal failure. It can be administered intravenously. Chemically, **mannitol** is an alcohol and a sugar, or a polyol; it is similar to xylitol or sorbitol. However, **mannitol** has a tendency to lose a hydrogen ion in aqueous solutions, which causes the solution to become acidic. For this reason, it is not uncommon to add a substance to adjust its pH, such as sodium bicarbonate.

Mannitol can also be used to open the blood-brain barrier by temporarily shrinking the tightly coupled endothelial cells that make up the barrier. This makes **mannitol** indispensable for delivering drugs directly to the brain (e.g. in the treatment of Alzheimer's disease).

Mannitol is also used as a sweetener for people with diabetes. **Mannitol** also has a negative heat of solution. For this reason, **mannitol** is a sweetener in "breath-freshening" candies, the cooling effect adding to the fresh feel. In doses larger than 20g it acts as a laxative, and is sometimes sold as a laxative for children.

It is sometimes used as a dilutant for heroin or other illicit drugs.

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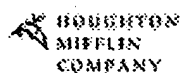
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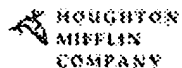
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